



APPLICATION FOR EMPLOYMENT

Referred by whom: THE WILKINS GROUP, INC
1710 FIRMAN DRIVE, SUITE 200
RICHARDSON, TX 75081
972-479-1090, 972-479-1099 (fax)
www.wilkins.com
Email Address:

We consider applicants for all positions without regard to race, color, religion, sexual orientation, national origin, age, creed, gender, marital or veteran status, disability, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT) Date of Application

Position(s) Applied for:

Name Last First Middle Tel Area Code Number

Address Number Street City State Zip Code

If employed and you are under 18, can you furnish a work permit? yes no

Have you filed an application here before? yes no
If yes, give date

Have you ever been employed here before? yes no
If yes, give date

Are you employed now? yes no

May we contact your present employer? yes no

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? yes no
(Proof of citizenship or immigration status will be required upon employment.)

On what date would you be available for work?

Are you available to work full time part time shift work temporary

Have you been convicted of a felony within the last 7 years? yes no
(Conviction will not necessarily disqualify applicant from employment.)

If yes, please explain:

AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION:

	Elementary	High	College/ University	Graduate/ Professional
School Name				
Years Completed/ Degree	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				
Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities				

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Honors Received: State any additional information you feel may be helpful to us in considering your application.

List professional, trade, business, or civic activities and offices held. (You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, handicap, or other protected status):

Give name, address, and telephone number of three references who are not related to you and are not previous employers:

1) Name:	_____	Telephone:	_____
Address:	_____	Email:	_____
2) Name:	_____	Telephone:	_____
Address:	_____	Email:	_____
3) Name:	_____	Telephone:	_____
Address:	_____	Email:	_____

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organization names which would reveal sex, race, religion, national origin, age, ancestry, handicap, or other protected status):

1.	EMPLOYER:		DATES EMPLOYED	
	ADDRESS:		FROM:	TO:
	PHONE NUMBER:		HOURLY RATE / SALARY	
	JOB TITLE:	SUPERVISOR:	STARTING:	FINAL:
	WORK PERFORMED:			

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	REASON FOR LEAVING:		
2.	EMPLOYER:		DATES EMPLOYED
	ADDRESS:		FROM: TO:
	PHONE NUMBER:		HOURLY RATE / SALARY
	JOB TITLE:	SUPERVISOR:	STARTING: FINAL:
	WORK PERFORMED:		
	REASON FOR LEAVING:		
3.	EMPLOYER:		DATES EMPLOYED
	ADDRESS:		FROM: TO:
	PHONE NUMBER:		HOURLY RATE / SALARY
	JOB TITLE:	SUPERVISOR:	STARTING: FINAL:
	WORK PERFORMED:		
	REASON FOR LEAVING:		
4.	EMPLOYER:		DATES EMPLOYED
	ADDRESS:		FROM: TO:
	PHONE NUMBER:		HOURLY RATE / SALARY
	JOB TITLE:	SUPERVISOR:	STARTING: FINAL:
	WORK PERFORMED:		
	REASON FOR LEAVING:		

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment experience, or education:

NOTES:

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 180 days. If I wish to be considered for employment beyond this time period, I understand that I need to inquire as to whether or not applications are being accepted at that time.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer and me in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

Return Application To:
The Wilkins Group, Inc.
1710 Firman Drive, Suite 200
Richardson, TX 75081
Phone: 1-972-479-1090 / Fax: 1-972-479-1099

FOR PERSONNEL DEPARTMENT USE ONLY	
Arrange Interview: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Remarks: _____ _____	
Employed: <input type="checkbox"/> YES <input type="checkbox"/> NO	Date of Employment _____
Job Title _____	Hourly Rate/Salary _____
Department _____	
By _____	
Name & Title	Date